

Director will examine the written medical documentation submitted in support of the claim and determine whether it meets the requirements of the regulations and satisfies the criteria for eligibility established by the Act and the regulations. The Assistant Director may, for the purposes of verifying such eligibility, require the claimant or eligible surviving beneficiary to provide an authorization to release any medical record identified in these regulations. If the Assistant Director determines that the documentation does not meet the requirements of the regulations, or does not satisfy the criteria for eligibility established by the Act and the regulations, he shall so advise the claimant or eligible beneficiary in writing setting forth the reasons for his determination and provide the claimant or eligible beneficiary sixty days from the date of his letter, or such greater period as he permits, to furnish additional written medical documentation which meets the requirements of the Act and the regulations. Where appropriate, the Assistant Director may require the claimant or eligible beneficiary to provide an authorization to release additional records as an alternative to, or in addition to, the claimant furnishing such additional records. If the claimant or eligible beneficiary fails to provide sufficient written medical documentation, or a valid release when requested by the Assistant Director, within sixty days, or the greater period approved by the Assistant Director, then the Assistant Director shall issue a Decision denying the claim without further review.

(c) *Review of the records.* If necessary, the Assistant Director will examine the other records submitted in support of the claim to prove those matters set forth in all other sections of the Act and the regulations, and determine whether such records meet the requirements of the regulations satisfy all other criteria for eligibility established by the statute and the regulations. The Assistant Director may, for the purposes of verifying such eligibility, require the claimant or eligible surviving beneficiary to provide an authorization to release any record identified in these regulations. If the Assistant Director determines that the records do

not meet the requirements of the regulations, or does not satisfy the criteria for eligibility established by the Act and the regulations, he shall so advise the claimant or eligible surviving beneficiary in writing setting forth the reasons for his determination and provide the claimant or eligible surviving beneficiary sixty days from the date of this letter, or such greater period as he permits, to furnish additional records which meet the requirements of the Act and the regulations. Where appropriate, the Assistant Director may require the claimant or eligible surviving beneficiary to provide an authorization to release additional records as an alternative to, or in addition to, the claimant or eligible beneficiary furnishing such additional records. If the claimant or eligible beneficiary fails to provide sufficient records, or a valid release when requested by the Assistant Director, within sixty days, or the greater period approved by the Assistant Director, then the Assistant Director shall issue a Decision denying the claim without further review.

(d) *Decision.* The Assistant Director shall review each claim and issue a written decision on each claim within twelve months of the date the claim was filed. Any decision denying a claim shall set forth reasons for denial and also indicate that the decision of the Assistant Director may be appealed to the Assistant Attorney General, Civil Division, in writing within sixty days from the date of the decision, or such greater period as may be permitted by the Assistant Director, and identify the address to written appeal should be sent.

§ 79.53 Appeals procedures.

(a) An appeal must be in writing, and must be received by the Radiation Exposure Compensation Unit within sixty days of the date of the decision denying the claim. Appeals must be sent to the following address: Radiation Exposure Compensation Program, Appeal of Decision, U.S. Department of Justice, P.O. Box 146, Ben Franklin Station, Washington, DC 20044-0146.

(b) The claimant or eligible surviving beneficiary may set forth in the appeal the reason why he/she believes that the

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decision of the Assistant Director is incorrect, but may not submit new written medical documentation or other records to the Assistant Attorney General that were not provided to the Assistant Director before he issued his decision.

(c) Upon receipt of an appeal, the Radiation Exposure Compensation Unit shall forward the appeal, the decision, the claim and all supporting documentation to the Assistant Attorney General, of the Appeals Officer if one is designated, for action on the appeal. If the claim was not received within the sixty day period, the appeal may be denied without further review.

(d) The Assistant Attorney General or Appeals Officer shall review the appeal and other information forwarded by the Unit. After such review, the Assistant Attorney General or Appeals Officer shall issue a Memorandum which shall either affirm or reverse the Assistant Director's decision, or when appropriate, remand the claim to the Assistant Director for further action, and shall include a statement of the reasons for such reversal, affirmance, or remand. The Memorandum and all papers relating to the claim shall be returned to the Radiation Exposure Compensation Unit which shall promptly inform the claimant or eligible surviving beneficiary of the action of the Assistant Attorney General or Appeals Officer. A Memorandum affirming or reversing the Assistant Director's decision shall be deemed to be the final action of the Department of Justice on the claim.

§ 79.54 Attorneys.

(a) A claimant or eligible beneficiary need not be represented by an attorney to file a claim under the Act or receive payment under the Program. To the extent permitted by the resources available to administer the Program, the Assistant Director may provide assistance through the Radiation Exposure Compensation Unit to all persons who file claims for compensation under the Act, or may establish a priority of assistance.

(b) If the claimant or eligible surviving beneficiary desires to be represented, then the attorney selected by

the claimant or eligible surviving beneficiary shall file with the Assistant Director a written statement that he/she is a member in good standing of the bar of the highest court of a state, and is authorized to represent the particular person on whose behalf he/she acts.

(c) The total compensation payable to the attorney by the claimant or eligible surviving beneficiary may not exceed ten percent of the amount of the payment to that person.

§ 79.55 Procedures for payment of claims.

(a) Payment shall be made to the claimant, or to the legal guardian of the claimant, unless the claimant is deceased at the time of the payment. In cases involving a claimant who is deceased, payment shall be made to an eligible surviving beneficiary, or to the legal guardian acting on behalf of the eligible surviving beneficiary, in accordance with the terms and conditions specified in section 6(c)(4)(A) of the Act.

(b) In cases involving the approval of a claim, the Assistant Director shall take all necessary and appropriate steps to determine the correct amount of any offset to be made to the amount awarded under the Act, and to verify the identity of the claimant or the existence of eligible surviving beneficiaries who are entitled by the Act to receive the payment the claimant would have received. The Assistant Director may conduct any investigation, require any claimant or eligible surviving beneficiary to provide or execute any affidavit, record, or document, or authorize the release of any information as the Assistant Director deems necessary to ensure that the compensation payment is made in the correct amount and to the correct person(s). If the claimant or eligible surviving beneficiary fails or refuses to execute an affidavit or release of information, or provide a record or document requested, or fails to provide access to information, such failure or refusal may be deemed to be a rejection of the payment, unless the claimant or eligible surviving beneficiary of the